

New Orleans, Louisiana – 2002 (N=197)

Figure A. Age of GISP participants, in years, 2002

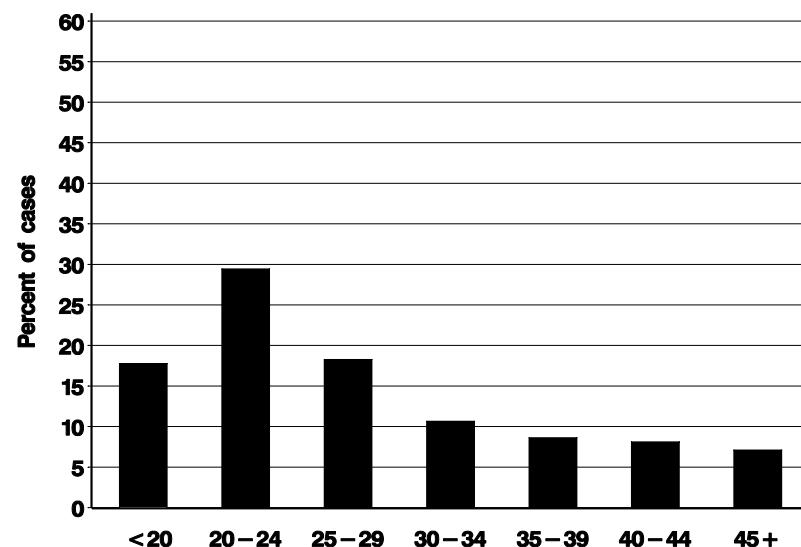


Figure B. Race/ethnicity of GISP participants, 2002

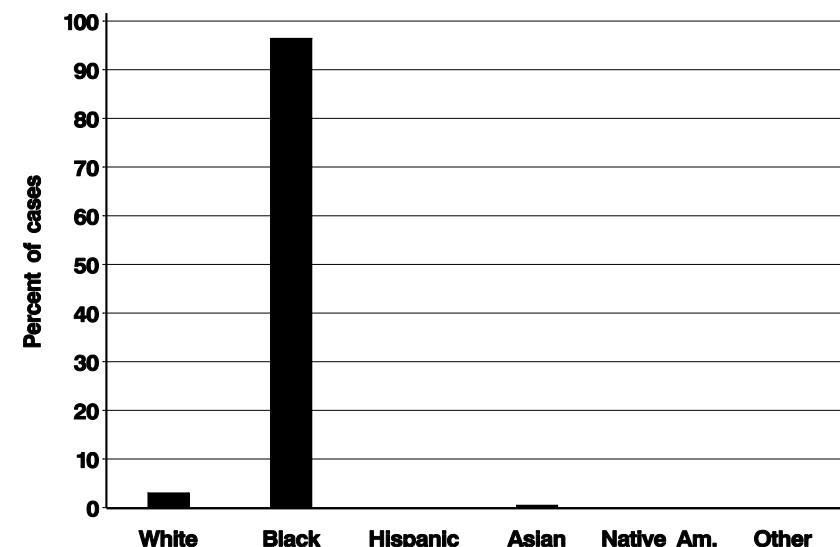


Figure C. Percentage of GISP participants identifying as men who have sex with men, 1988–2002

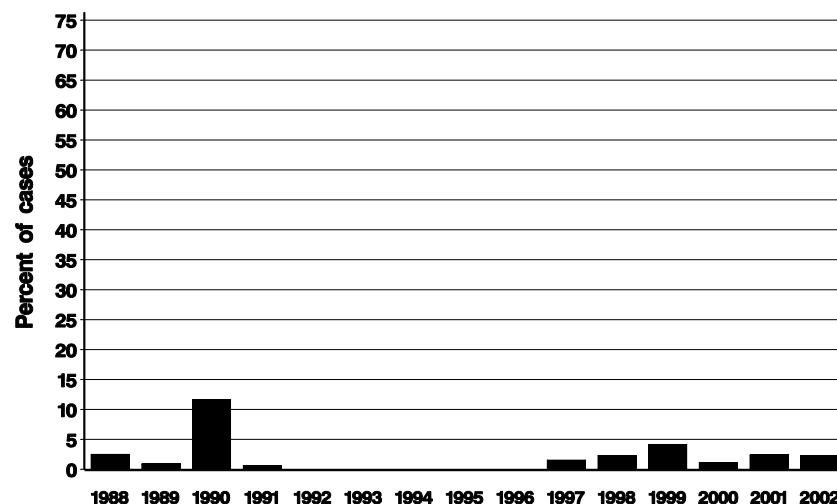
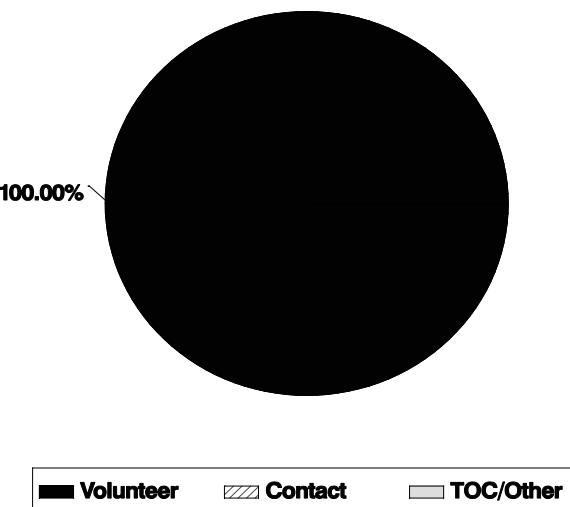
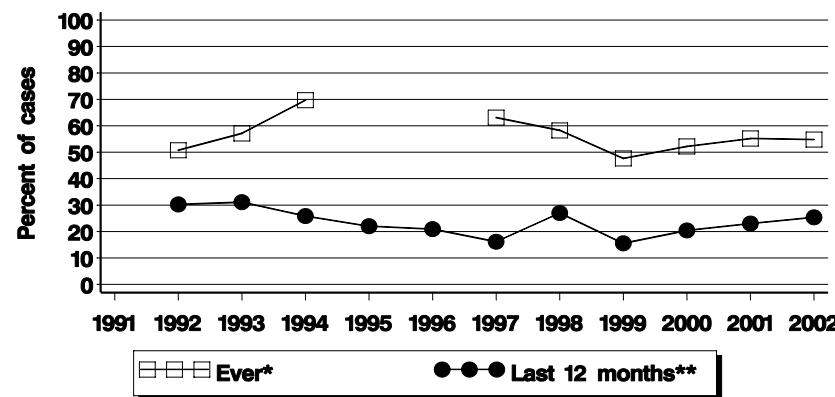


Figure D. Reason for visit among GISP participants, 2002



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Figure E. Previous episode of gonorrhea among GISP participants, 1991–2002

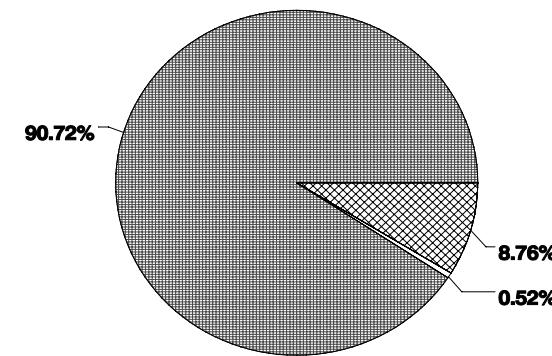


*Data first collected in 1991.

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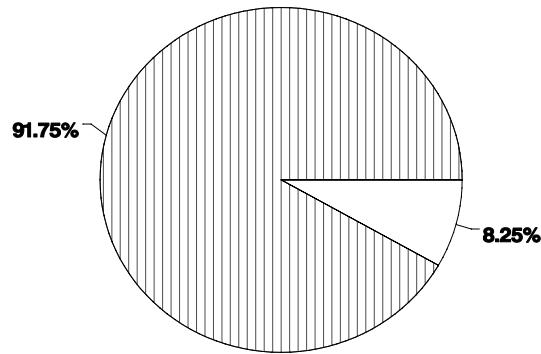
Note: Data points not shown when >30% data missing.

Figure F. Drugs used to treat gonorrhea among GISP participants, 2002



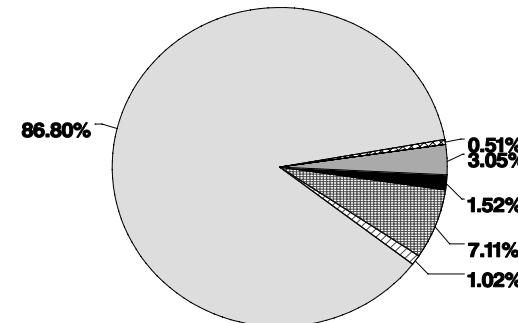
Drug	Percentage
Cefixime	90.72%
Ciprofloxacin	8.76%
None	0.52%

Figure G. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2002



Drug	Percentage
Doxy/Tet	91.75%
Azi/Ery	8.25%

Figure H. Resistance to penicillin and tetracycline among GISP isolates, 2002



Resistance Pattern	Percentage
Susceptible	86.80%
PenR	3.05%
TetR	1.52%
CMRNG	7.11%
TRNG	1.02%
PPNG	0.51%

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Figure I. Decreased susceptibility to ceftriaxone among GISP isolates, 1988–2002

No isolates with decreased susceptibility to ceftriaxone have been identified at this clinic.

Figure J. Decreased susceptibility to cefixime among GISP isolates, 1992–2002

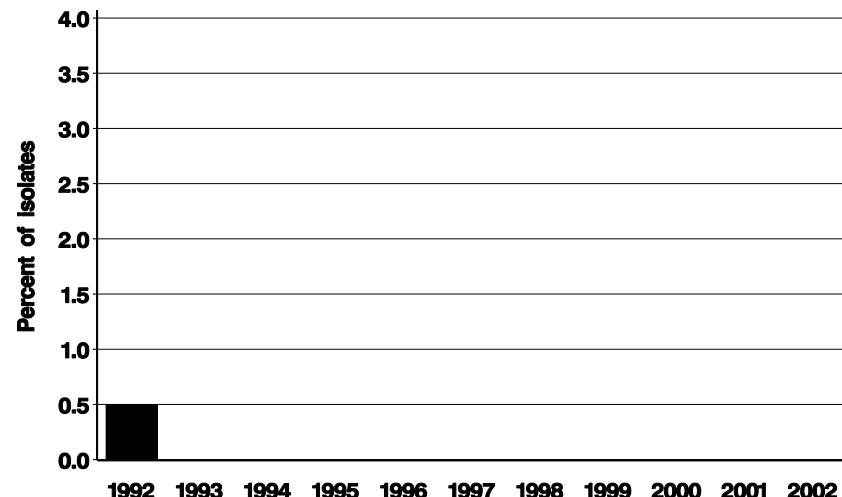
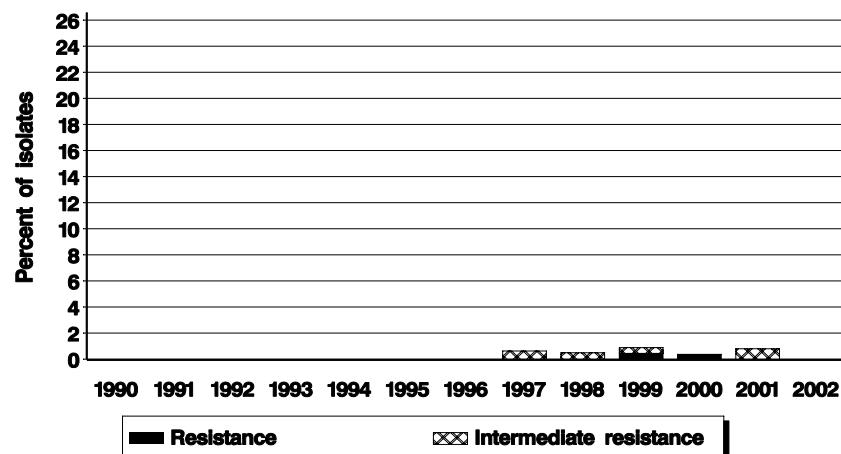
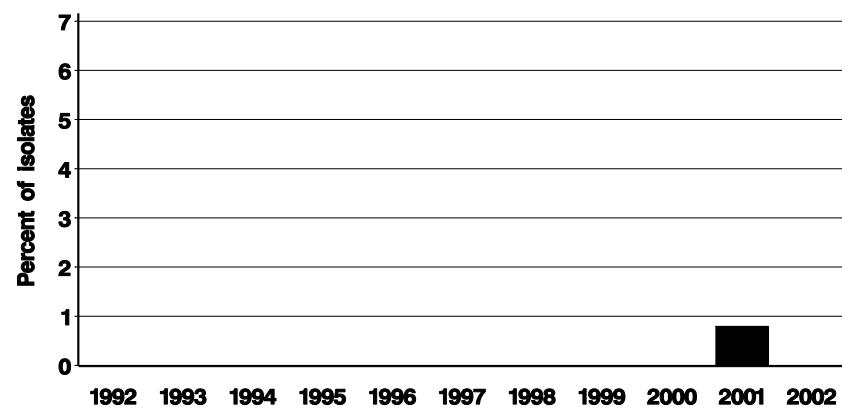


Figure K. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990–2002



Note: Susceptibility to ciprofloxacin first measured in 1990.

Figure L. Decreased susceptibility to azithromycin among GISP isolates, 1992–2002



Note: Susceptibility to azithromycin first measured in 1992.

Note: Decreased susceptibility to azithromycin is defined here as $\geq 1.0 \text{ ug/ml}$.
No NCCLS criteria currently exist.